## 2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L17000108490

Entity Name: CREDIBILITY ASSURANCE, LLC

**Current Principal Place of Business:** 

509 S CHICKSAW TRAIL #197 ORLANDO, FL 32825

**Current Mailing Address:** 

509 S CHICKSAW TRAIL #197 ORLANDO, FL 32825

FEI Number: 82-1579954 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GRIBBLE, JOSEPH M 509 S CHICKASAW TRAIL NUM 197 ORLANDO, FL 32825 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: JOSEPH M. GRIBBLE 04/30/2019

Electronic Signature of Registered Agent

Date

FILED Apr 30, 2019

**Secretary of State** 

0202371995CC

Authorized Person(s) Detail:

Title OMGR Title VMGR

Name GRIBBLE, JOSPEH M II Name GRIBBLE, JOSEPH M II

Address 509 S CHICKSAW TRAIL #197 Address 509 S CHICKSAW TRAIL #197

City-State-Zip: ORLANDO FL 32825 City-State-Zip: ORLANDO FL 32825

Title ST

Name GRIBBLE, JOSEPH M II

Address 509 S CHICKSAW TRAIL #197

City-State-Zip: ORLANDO FL 32825

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: JOSEPH M. GRIBBLE II

**OMGR** 

04/30/2019